

APPLICATION FORM

Application to Designate a Neighbourhood Area Town & Country Planning Act 1990 Neighbourhood Planning (General) Regulations 2012

RELEVANT BODY

In North Norfolk District a Parish or Town Council is the relevant body in which to apply for designation of a Neighbourhood Area. Please confirm that you represent the relevant body to undertake of

neighbourhood planning in your area in accordance with section 61G of the 1990 Act and section 5C the 2012 Regulations.				
Yes Counci	Name of Parish I:	HOLT TOWN	COUNCIL	
PARISH CLER	RK DETAILS			
Last Name	DANA		Title mas	
First Name	DIANA			
House Name /	/ Number			
Address 1	COUNCIL OFF	ICES		
Address 2	COMMUNITY	CENTRE		
Address 3	KEAR DOE	WAY		

County

Town

NR25 Post Code

01263 712149 holt town council e grail. com. Tel Email

ADDITIONAL CONTACT DETAILS (IF NOT PARISH CLERK)

Last Name	Title	
First Name		
House Name / Number		
Address 1		
Address 2		
Address 3		
Town		
County		
Post Code		
Email	Tel	

NAME OF NEIGHBOURHOOD AREA

Please give the name by which your neighbourhood area will be known.

1-1047

EXTENT OF THE NEIGHBOURHOOD AREA

Will the Neighbourhood Area cover:

The whole parish YES Part of the parish ~ Other parishes ~ o

(If part of the parish, please include an Ordnance Survey map showing the boundary of the proposed Neighbourhood Area).

Please describe why you consider the extent of the proposed Neighbourhood Area is appropriate:

WE WOULD LIKE THE PLAN TO PROVIDE A
VISION FOR THE FUTURE OF DUR PARISH WITHIN
THE DEPINED PARISH BOUNDARY THIS WILL PROVIDE
GEOGRAPHICAL, SOCIAL AND ECONOMIC CONTINUITY

INTENTION OF THE NEIGHBOURHOOD AREA

Which of the following do you intend to undertake within your Neighbourhood Area:

Neighbourhood Development Plan

/

Neighbourhood Development Order

Community Right to Build Order

JOINT PARISH DETAILS

If you are applying with an adjoining parish or parishes, please provide the clerks contact details for the parishes involved.

NIA

DECLARATION

I/we hereby apply to designate a Neighbourhood Area as described on this form, and (if required), on the attached plan.

In the case of joint parish applications, a signature from each parish is requested.

Name

Signature

Organisation

Date

DDANN

TOWN CLERK

TOWN .

12/08/13